

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 6
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) United We Can		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">Y Y Y Y Y Y Y Y Y Y</table>	

Full Name of Payee Ardleigh Group			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">25</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2016</table>		
Mailing Address PO Box 12182			Amount <table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">26463.83</table>		
City Washington	State DC	Zip Code 20006	Transaction ID : D368796		
Purpose of Expenditure Canvassing Services		Category/Type 001	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">25</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2016</table>		
Name of Federal Candidate TRUMP, DONALD J, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">2547766.17</table>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee Ardleigh Group			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">25</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2016</table>		
Mailing Address PO Box 12182			Amount <table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">10809.17</table>		
City Washington	State DC	Zip Code 20006	Transaction ID : D368797		
Purpose of Expenditure Canvassing Services		Category/Type 001	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">25</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2016</table>		
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">2547766.17</table>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:150px; height:20px; text-align:right">37273.00</table>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<table border="1" style="display:inline-table; width:150px; height:20px; text-align:right"></table>
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:150px; height:20px; text-align:right"></table>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, , ,

[Electronically Filed]

Date

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Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 6
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) United We Can		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee The Pivot Group		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016	
Mailing Address 1720 I Street, NW Suite 550		Amount 4966.47	
City Washington	State DC	Zip Code 20006	Transaction ID : D368799
Purpose of Expenditure Direct Mail	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee The Pivot Group		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016	
Mailing Address 1720 I Street, NW Suite 550		Amount 4966.47	
City Washington	State DC	Zip Code 20006	Transaction ID : D368800
Purpose of Expenditure Direct Mail	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016	
Name of Federal Candidate TRUMP, DONALD J, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	9932.94
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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10 / 26 / 2016

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) United We Can	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mack-Sumner Communications LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016	
Mailing Address 2001 N. Beauregard St. Suite 420		Amount 5227.18	
City Alexandria	State VA	Zip Code 22311	Transaction ID : D368801
Purpose of Expenditure Direct Mail	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016	
Name of Federal Candidate TRUMP, DONALD J, ,		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Mack-Sumner Communications LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016	
Mailing Address 2001 N. Beauregard St. Suite 420		Amount 5227.18	
City Alexandria	State VA	Zip Code 22311	Transaction ID : D368802
Purpose of Expenditure Direct Mail	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016	
Name of Federal Candidate AYOTTE, KELLY A, ,		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	10454.36
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) United We Can		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee The Pivot Group		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2016	
Mailing Address 1720 I Street, NW Suite 550		Amount 6723.20	
City Washington	State DC	Zip Code 20006	Transaction ID : D368808
Purpose of Expenditure Sample Ballots	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 26 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee The Pivot Group		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2016	
Mailing Address 1720 I Street, NW Suite 550		Amount 6723.20	
City Washington	State DC	Zip Code 20006	Transaction ID : D368809
Purpose of Expenditure Sample Ballots	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 26 / 2016	
Name of Federal Candidate MCGINTY, KATHLEEN ALANA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	13446.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee AL Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2016	
Mailing Address 222 W. Ontario St. Suite 600		Amount 4525.49	
City Chicago	State IL	Zip Code 60654	Transaction ID : D368811
Purpose of Expenditure Digital Advertising	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 26 / 2016	
Name of Federal Candidate TRUMP, DONALD J, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee AL Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2016	
Mailing Address 222 W. Ontario St. Suite 600		Amount 4392.38	
City Chicago	State IL	Zip Code 60654	Transaction ID : D368812
Purpose of Expenditure Digital Advertising	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 26 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	8917.87
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y / / / / / /	

Full Name of Payee AL Media, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016	
Mailing Address 222 W. Ontario St. Suite 600		Amount 4392.38	
City Chicago	State IL	Zip Code 60654	Transaction ID : D368813
Purpose of Expenditure Digital Advertising	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016	
Name of Federal Candidate MURPHY, PATRICK E, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
67032.93			

Full Name of Payee The Pivot Group		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016	
Mailing Address 1720 I Street, NW Suite 550		Amount 5250.00	
City Washington	State DC	Zip Code 20006	Transaction ID : D368814
Purpose of Expenditure Voter Canvass Literature	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016	
Name of Federal Candidate CARROLL, MORGAN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
5250.00			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	9642.38
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	89666.95

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